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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known		
				Application Number	10/698,076	
				Filing Date	October 29, 2003	
				First Named Inventor	Cynthia B. Robinson	
				Art Unit	1617	
				Examiner Name	Kevin J. Capps	
Sheet	1	Of	2	Attorney Docket Number		30775-714.201

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
IN	1.	US 2002/0032160	03/14/2002	Nyce	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ² - Number ³ - Kind Code ⁴ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁵

Examiner Signature	<i>Chapman</i>	Date Considered	2/14/07
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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ⁶
ll	2.	CRETICOS, P. S. Managing asthma in adults. Am J Manag Care. 2000; 6(17 Suppl):S940-63.	

Examiner Signature		Date Considered	7/16/07
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